

## NOTICE TO POLICE DEPARTMENT APPLICANTS

### (INSTRUCTIONS)

The Town of Highland will be accepting applications for the position of Probationary Police Officer starting November 21 thru December 21, 2016 for the purpose of establishing an eligibility list. The applications may be picked up/dropped off at the Highland Police Department 24/7.

In order to be considered as an applicant you must:

- Be at least 21 years of age and not older than 35 years when hired
- Be a United State Citizen
- Be a high school graduate or have a G.E.D. equivalency
- Be of good reputation and character
- Be able to pass an agility test, written test, polygraph, background investigation, Medical examination, and psychological examination.
- Have a valid driver's license
- Meet residency requirements within six months of employment

Fill out the short-form application completely and accurately whether it is a Certified or Non-Certified application for a Probationary Police Officer.

Non- Certified applicants will be charged a \$25.00 fee upon returning the application to the department.

Please type or print neatly.

ALL releases must be signed and dated and returned with your application if applicable.

Photo must be attached. Photo should be a recent head and shoulders type only approximately 2 x 3 in size.

Please note that if you successfully pass the agility and written examination you will be required to provide the following items in relatively short notice:

- High School Transcript
- College Transcripts (if applicable)
- DD214 ( if in Military)
- Law Enforcement Certifications (if applicable)
- Employee references (2) – names, addresses, telephone contact numbers, years of employment service
- Non-relative references (5) – (no former employers) – names, addresses, telephone contact numbers, years known.

Please see the Town of Highland website and the links within showing the agility requirements/demonstrating the tests involved. We will be utilizing Academy EXIT standards NOT entrance standards in our testing. If you have not already done so prepare yourself both physically and mentally.

NOTE: If you are currently certified thru the Indiana Law Enforcement Academy (ILEA) or a Law Enforcement Agency recognized by the Highland Police Department and the State of Indiana you will NOT be required to participate in either the agility testing or written testing. Therefore, it is not necessary to obtain a Physicians Referral Form.

Submit your application as soon as possible in case it is incomplete and we may contact you.

Any questions do not hesitate to call 219-838-3184, Monday-Friday 8:00 A.M.– 4:00P.M. identifying yourself as an applicant, and request to speak with someone in Administration.

**ALL SHORT FORM APPLICATIONS MUST BE RETURNED TO THE CHIEF'S OFFICE OF THE HIGHLAND POLICE DEPARTMENT BY MIDNIGHT DECEMBER 21, 2016.**

We are proud to be an equal opportunity employer. It is our policy to provide equal employment opportunities to all qualified employees and applicants for employment without regard to race, religion, color, sex, age, mental or physical disability unrelated to ability, national origin, marital status, or any other projected status consistent with applicable law. Our intent is to recruit and retain qualified employees through objective measures and qualifications, education, training, and performance.

\$25.00 Fee\_\_\_\_\_

Medical Release Form \_\_\_\_\_

Attach photo here

HIGHLAND POLICE DEPARTMENT

(2x3)

(Short form)

Application for Probationary Police Officer

Name in Full: \_\_\_\_\_  
(last) (first) (middle)

Home address: \_\_\_\_\_  
(street) (city/town) (state & zip)

Home phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_

Social Security number: \_\_\_\_\_

Marital status: Married: \_\_\_\_\_ Single: \_\_\_\_\_ Divorced: \_\_\_\_\_ Separated: \_\_\_\_\_

Number of dependants: \_\_\_\_\_ Ages: \_\_\_\_\_

Current place of employment: \_\_\_\_\_

Education: \_\_\_\_\_

Special Law Enforcement Training/Certifications: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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**INFORMED CONSENT FOR THE HIGHLAND POLICE DEPARTMENT'S  
PHYSICAL AGILITY TESTING**

1. Explanation of the Physical Agility Testing Evaluation

This evaluation has been designed to assess your ability to perform certain job tasks specifically related to law enforcement. This evaluation will assess the efficiency of the heart, lungs, circulatory system, and flexibility of the lower back, hamstring musculature, upper body strength, and explosive power.

2. Risks and Discomfort

There exists the possibility of certain changes occurring during the evaluation. These include but are not limited to abnormal blood pressure, fainting, disorders of the heartbeat, and in rare instances, heart attack. There also exists the possibility of joint sprain and/or tendon strain. Emergency equipment and trained personnel will be on site to deal with unusual situations that arise.

3. Benefits to be Expected

The results obtained from the Physical Agility Testing Evaluation will assist the Highland Police Department in determining your state of performance readiness. The results obtained will also benefit you in that you will be consciously aware of your physical health and motor ability.

4. Inquiries

If you have any questions concerning the Physical Agility Testing, please contact Deputy Commander John Banasiak at (219) 838-3184, ext 4058.

5. Freedom of Consent

Your permission to perform the Physical Agility Testing Evaluation is voluntary. (Passing this testing is a requirement for further hiring consideration).

I have read this form and I understand the test procedures that I will perform. I consent to participate in the Highland Police Department's Physical Agility Testing Evaluation.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness's Printed Name

\_\_\_\_\_  
Witness's signature

\_\_\_\_\_  
Date

**PHYSICIAN'S REFERRAL FORM FOR THE HIGHLAND POLICE  
DEPARTMENT'S AGILITY TEST**

Dear Doctor:

Your patient \_\_\_\_\_, has volunteered to participate in the Highland Police Department's physical agility testing. These tests are designed to evaluate the individual's state of physical readiness prior to possibly embarking on a career in law enforcement.

Applicants must meet the below listed standards in all categories in order to continue the hiring process. The agility testing is designed to assess the following:

<u>Test</u>	<u>Standards (requirement)</u>
1. Vertical Jump	16 inches
2. One Minute Sit Up	29
3. 300 Meter Run	71 seconds
4. Maximum Push Up	25
5. 1.5 Mile Run	16 minutes, 28 seconds

Failure to comply with these standards will disqualify the applicant from further processing.

Please identify whether or not the individual is considered by you to be fit to participate in the agility testing.

**NOTE:** The testing will not be administered without this completed form.

I certify that this individual is fit to participate in the Highland Police Department's agility testing.

REFERRING PHYSICIAN (signature)\_\_\_\_\_

Printed Name\_\_\_\_\_

Address\_\_\_\_\_

City\_\_\_\_\_ State\_\_\_\_\_ Zip code\_\_\_\_\_

Office Telephone Number\_\_\_\_\_